

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 23, 2007 08:00 AM
Secretary of State

DOCUMENT # 765730

1. Entity Name
CLAN DUNBAR, INC.



Principal Place of Business
**2555 WELLINGTON SOUTH
CARSON CITY, NV 89703 US**

Mailing Address
**2555 WELLINGTON SOUTH
CARSON CITY, NV 89703 US**



01252007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
02-0408172

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DUNBAR, DAVID GORDON
10155 COLLINS AVE
APT #1606
MIAMI, FL 33154**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MAKSEL, MATTHEW T
100 ELLINWOOD DR APT C-222
PLEASANT HILL, CA 94523**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CLUGSTON, NORMAN D
5202 BELLFLOWER BLVD
LAKEWOOD, CA 90713**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
DUNBAR, ROBERT W
2555 WELLINGTON S
CARSON CITY, NV 89703**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
DUNBAR, JEANNINE V
2555 WELLINGTON S
CARSON CITY, NV 89703**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000646355
03/06/07-80026-024 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JEANNINE V. DUNBAR - SECRETARY **Feb 12/07** **1-775-841-1826**

Date

Daytime Phone #